

Has your child been to summer camp before? _____ Where and length
of stay:_____

How does your child feel about going to camp? Any hopes, fears, expectations?

What do you hope your child will gain from participating in this camp experience?

Are there any special concerns or issues we should be aware of?

Parent's Signature

Please return this form by email or mail.
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Mail: Turtlehead Farm , 231 Lime Quarry Road, Eastsound, WA 98245